Claim 1 of the subject application is directed to a percutaneous myocardial revascularization marking and therapeutic or diagnostic agent delivery system comprising: a treatment catheter having a proximal end interconnected with a source of tissue ablative energy and a distal end for applying that energy to the heart wall to create a channel therein, and a channel marking and drug delivery catheter subsystem connected to an imaging medium source and a source of a therapeutic or diagnostic agent and having a distal end proximate the distal end of the treatment catheter for applying both an imaging medium and the therapeutic or diagnostic agent in or proximate the channel.

Specifically, *Ellis* does not disclose "a channel marking and drug delivery catheter subsystem connected to an imaging medium source and a source of a therapeutic or diagnostic agent and having a distal end proximate the distal end of the treatment catheter for applying both an imaging medium and the therapeutic or diagnostic agent in or proximate the channel" as claimed by the applicant.

Ellis is directed to a percutaneous myocardial revascularization device and method. The Examiner states that Ellis disclose a treatment catheter and a channel marking and drug delivery subsystem as claimed by the applicant. The drug delivery of Ellis is accomplished by a hypodermic needle connected to the sole catheter of Ellis. The hypodermic needle of Ellis is an alternative device to the electrode 40 which is used to form channels in the heart wall. See Figs. 16-18 and Col. 15, lines 10-17 of Ellis.

However, *Ellis* does not disclose a channel marking and drug delivery catheter subsystem having a distal end proximate the distal end of the treatment catheter as claimed by the applicant. Ellis does not disclose a channel marking and drug delivery catheter subsystem of any kind, much less one with a distal end proximate the distal end of the

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LE-199J JDS:lr treatment catheter. Figures 3 and 10A of the subject application show two embodiments of the channel marking and delivery catheter subsystem of the present invention.

It is clear that the hypodermic needle of Ellis is not part of a channel marking and drug delivery catheter subsystem with a distal end proximate the distal end of the treatment catheter as claimed by applicant as *Ellis* fails to disclose such a subsystem.

Accordingly, as *Ellis* fails to disclose all of the elements of claim 1, specifically "a channel marking and drug delivery catheter subsystem connected to an imaging medium source and a source of a therapeutic or diagnostic agent and having a distal end proximate the distal end of the treatment catheter for applying both an imaging medium and the therapeutic or diagnostic agent in or proximate the channel", *Ellis* fails to render claim 1 obvious. Therefore, applicants submit that claim 1 is patentable over *Ellis*.

Each of the Examiner's rejections has been addressed or traversed. Accordingly, it is respectfully submitted that the application is in condition for allowance. Early and favorable action is respectfully requested.

If for any reason this Response is found to be incomplete, or if at any time it appears that a telephone conference with counsel would help advance prosecution, please telephone the undersigned or his associates, collect in Waltham, Massachusetts, (781)890-5678.

Respectfully submitted,

ason D. Shanske

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